

# Resource Typing Guidance

## Disaster Mental/Behavioral Health and Spiritual Care

The **California Public Health and Medical Emergency Operations Manual (EOM)** Workgroup has developed two tools to support the ability of an impacted jurisdiction to assess its needs relative to disaster behavioral health, identify resource shortfalls, and request the appropriate types and numbers of assisting personnel.<sup>1</sup>

The first tool provides valuable information on the types of resources, along with numbers and ratios, that support certain disaster missions. The second tool provides greater detail regarding the specific types of personnel that may be suitable for deployment.

We recommend the following for all disaster missions:

- The requesting jurisdiction should specify the qualifications of the Behavioral Health (BH) and Disaster Spiritual Care (DSC) staff they are requesting.
- The sending jurisdiction should match the request to the qualifications of their staff offered for deployment.
- For resource requests for BH and DSC staff resources from out-of-county, consider a *minimum* of a 7 day disaster assignment (5 days working, 2 days travel).
- Statewide training/credentialing standards for Disaster BH and DSC have not yet been established. Therefore, staff offered for deployment should be vetted and trained in Disaster BH or DSC response *per the requirements of the sending organization*.

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<sup>1</sup> Tools created by Sandra Shields, Los Angeles Department of Mental Health, SaShields@dmh.lacounty.gov

# California Resource Typing for Mental/Behavioral Health and Spiritual Care

## By Specific Resource Type

Behavioral Health = BH      MH = Mental Health      Disaster Spiritual Care = DSC

Resource	Eligibility Category	CA Licensing Board/Association	Source	Mission/Task
BH Specialist – <b>Licensed</b>	1) Psychiatrist (MD) 2) Psychologist (PhD), (PsyD) 3) Licensed Clinical Social Worker (LCSW) 4) Licensed Marriage and Family Therapist (LMFT) 5) Licensed Professional Clinical Counselor (LPCC) 6) Licensed Educational Psychologist (LEP)	1) Medical Board of CA <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a> 2) Dept of Consumer Affairs Board of Psychology <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a> 3) Department of Consumer Affairs Board of Behavioral Sciences <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a> 4) Department of Consumer Affairs Board of Behavioral Sciences <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a> 5) Department of Consumer Affairs Board of Behavioral Sciences <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a> 6) Department of Consumer Affairs Board of Behavioral Sciences <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a>	<ul style="list-style-type: none"> <li>• County MH/BH Department staff and contract providers</li> <li>• County Departments of Health and Public Health</li> <li>• California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> <li>• US Public Health Service (USPHS)</li> <li>• American Red Cross Disaster Mental Health and other VOADs with qualified BH/MH staff resources</li> <li>• Professional Organizations for each license type</li> </ul> <p>Note: BH staff must also meet the vetting and training requirements of the <i>sending</i> organization.</p>	<ul style="list-style-type: none"> <li>• Backfill for county or state staff</li> <li>• Community Education – Outreach</li> <li>• Crisis Teams</li> <li>• Employee/Staff mental health</li> <li>• Disaster Shelters</li> <li>• Local Assistance Center (LAC)</li> <li>• Disaster Recovery Center (DRC)</li> <li>• Family Assistance Center (FAC)</li> <li>• Public Health Points of Distribution (POD)</li> <li>• Hospital Surge</li> <li>• Recovery – BH/MH follow-up evaluation and trauma focused treatment</li> </ul>

Resource	Eligibility Category	CA Licensing Board/Association	Source	Mission/Task
BH Specialist – <b>Registered Associate (Intern)</b>	Psychological Assistant (PSB)  Associate Clinical Social Worker (ACSW)  Associate Marriage and Family Therapist (AMFT)  Associate Professional Clinical Counselor (APCC)	Same as above for all. <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a>	Same as above.	Same as above. <u>Must be deployed with a minimum of one</u> BH Specialist – <b>Licensed</b> or BH Specialist – <b>Supervisor</b> on site for supervision per location.
BH Specialist – <b>School Psychologist and School Counselor</b>	School Counselor with a Pupil Personnel Services (PPS) Credential and a specialization in School Counseling  School Psychologist with a Pupil Personnel Services (PPS) Credential with a specialization in School Psychology	California Commission on Teacher Credentialing  <a href="https://www.ctc.ca.gov/commission/lookup">https://www.ctc.ca.gov/commission/lookup</a>	<ul style="list-style-type: none"> <li>• Schools/school-based crisis response teams</li> <li>• County MH/BH Department staff and contract providers</li> </ul>	<ul style="list-style-type: none"> <li>• School-based crisis response</li> <li>• Community outreach</li> <li>• Teacher and school staff mental health support</li> <li>• Disaster Shelters and FACs with a high population of school-aged children</li> </ul>
BH Specialist- <b>Psychiatric Nurse and Nurse Practitioner MH</b>	Registered Nurse (RN with psych experience or specialty)  (Note: For a school-based disaster response, consider BH Specialist – Psychiatric Nurse and Nurse Practitioner with school nursing specialty/ experience or current RN -School Nurses.)	Department of Consumer Affairs Board of Registered Nursing  <a href="https://search.dca.ca.gov/">https://search.dca.ca.gov/</a>	<ul style="list-style-type: none"> <li>• County MH/BH Department staff and contract providers</li> <li>• County Departments of Health and Public Health</li> </ul>	<ul style="list-style-type: none"> <li>• Back fill staff in psychiatric care facilities or disaster field psychiatric hospital</li> <li>• Community Education – Outreach</li> <li>• Crisis Teams</li> <li>• Employee/Staff mental health</li> </ul>

Resource	Eligibility Category	CA Licensing Board/Association	Source	Mission/Task
<p><i>(Continued)</i></p> <p>BH Specialist- <b>Psychiatric Nurse and Nurse Practitioner MH</b></p>			<ul style="list-style-type: none"> <li>California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> <li>American Red Cross Disaster Mental Health and other VOADs with qualified BH/MH staff resources</li> <li>Professional Organizations for each license type</li> <li>US Public Health Services (USPHS)</li> </ul>	<ul style="list-style-type: none"> <li>Disaster Shelters</li> <li>Local Assistance Centers</li> <li>Family Assistance Centers (FAC)</li> <li>Hospital Surge</li> <li>Public Health Points of Dispensing (POD)</li> <li>Community Points of Distribution (C-POD)</li> </ul>
<p>Certified Drug and Alcohol Counselor</p>	<p>Certification from a National Commission for Certifying Agencies (NCCA) organization</p>	<p>Addiction Counselor Certification Board of California: <a href="http://caade.org/addiction-counselor-certification-board-california-accbc">http://caade.org/addiction-counselor-certification-board-california-accbc</a></p> <p>California Association of DUI Treatment Programs (CADTP): <a href="https://www.cadtp.org/">https://www.cadtp.org/</a></p> <p>California Consortium of Addiction Programs and Professionals (CCAPP): <a href="http://www.dhcs.ca.gov/Pages/default.aspx">http://www.dhcs.ca.gov/Pages/default.aspx</a></p>	<ul style="list-style-type: none"> <li>County MH/BH Department staff and contract providers</li> </ul>	<ul style="list-style-type: none"> <li>Education on addictions</li> <li>Employee/Staff mental health (Addictions only)</li> <li>Disaster shelters (<i>Addiction counseling only</i>)</li> </ul>
<p><b>BH Supervisor</b></p>	<p>BH Specialist – <b>Licensed</b></p> <p>BH Specialist – <b>School Psychologist and School Counselor</b></p> <p>BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner MH</b></p>	<ul style="list-style-type: none"> <li>Licensed as specified under “BH Specialist - Licensed” above.</li> <li>Previous disaster deployment.</li> <li>FEMA IS 100 and 700 (minimum)</li> <li>Endorsed by sending organization as a supervisor capable of supervising the BH response in the field.</li> </ul>	<p>Same as above for the BH Specialist- Licensed</p>	<ul style="list-style-type: none"> <li>Same as above for the BH Specialist – Licensed (above) but at the Supervisory level.</li> <li>Recommended ratio of BH Supervisors to BH staff is 1:7.</li> </ul>

Resource	Eligibility Category	CA Licensing Board/Association	Source	Mission/Task
BH Unit Leader	BH Specialist – <b>Licensed</b> BH Specialist – <b>School Psychologist and School Counselor</b> BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner MH</b>	<ul style="list-style-type: none"> <li>• Licensed as specified under “BH Specialist-Licensed” above.</li> <li>• Disaster Mental Health Subject Matter Expert (SME)</li> <li>• Previous disaster deployment as a BH Supervisor</li> <li>• MH/BH Tactics and Incident Action Planning expertise</li> <li>• FEMA IS 100 and 700 (minimum)</li> <li>• Endorsed by sending organization as a BH Unit Leader capable of managing the BH Unit at the EOC/DOC level and/or capable of functioning as part of “BH Mission Support Team”.</li> </ul>	Same as above for the BH Specialist- Licensed	<ul style="list-style-type: none"> <li>• This is an EOC/DOC – level Unit Leader assigned under Operations with the mission to oversee the BH response for people in the impacted community</li> <li>• A BH Unit leader can also be deployed with an Emergency Management partner as a part of a “BH Mission Support Team”.</li> </ul>
Employee Health and Well Being Unit Leader	BH Specialist – <b>Licensed</b> BH Specialist – <b>School Psychologist and School Counselor</b> BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner MH</b>	<ul style="list-style-type: none"> <li>• Licensed as specified under “BH Specialist-Licensed” above.</li> <li>• Previous disaster deployment as a BH Supervisor</li> <li>• FEMA IS 100 and 700 (minimum)</li> <li>• Disaster Mental Health SME – a background/experience in Employee Assistance Programs (EAP) and/or Victim’s Witness programs is helpful for this position.</li> <li>• MH/BH tactics and Incident Action Planning expertise</li> <li>• Endorsed by sending organization as a BH Unit Leader capable of managing the Employee Health and Well Being Unit at the EOC level</li> </ul>	Same as above for the BH Specialist- Licensed	<ul style="list-style-type: none"> <li>• This is an EOC/DOC- level Unit Leader assigned under Operations or Logistics with the mission to oversee the Behavioral</li> </ul>

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<b>Disaster Spiritual Care (DSC)</b>				
DSC Specialist – <b>Professional Chaplain</b>	Professional Board Certified Chaplain – (Police, Fire, Law, Military, Hospitals, Mental Health, etc.)	<p>Association of Professional Chaplains: <a href="http://www.professionalchaplains.org/">http://www.professionalchaplains.org/</a></p> <p>National Association of Catholic Chaplains: <a href="https://www.nacc.org/">https://www.nacc.org/</a></p> <p>Neshama, Association of Jewish Chaplains: <a href="http://www.najc.org/about/mission">http://www.najc.org/about/mission</a></p> <p>College of Pastoral Supervision and Psychotherapy: <a href="http://pastoralreport.com/">http://pastoralreport.com/</a></p> <p>Also see Chaplaincy organizations for specific faith traditions</p> <p>Vetted and trained for DSC response by the sending organization.</p>	<ul style="list-style-type: none"> <li>• County MH/BH Department staff and contract providers</li> <li>• Police, Fire, Law, Hospital, Military Chaplains and vetted Chaplain teams</li> <li>• California Disaster Healthcare Volunteers (DHV) - including MRC</li> <li>• American Red Cross DSC Team and other VOADs with qualified DSC staff resources</li> </ul>	<ul style="list-style-type: none"> <li>• Memorial Services</li> <li>• Condolence Teams</li> <li>• Crisis Teams</li> <li>• Community Education – Outreach</li> <li>• Employee/staff mental health</li> <li>• Disaster Shelters</li> <li>• Family Assistance Center (FAC)</li> <li>• Hospital Surge</li> <li>• Public Health Points of Distribution (POD)</li> <li>• Community Points of Distribution (C-POD)</li> </ul>
DSC Specialist – <b>Endorsed DSC Provider</b>	<p>Community faith leader previously vetted, trained, affiliated, and endorsed by the sending organization.</p> <p>Note: <i>Spontaneous Unaffiliated Volunteer (SUV) DSC providers cannot be deployed through the mutual aid system.</i></p>	<ul style="list-style-type: none"> <li>• Affiliated with a government-based DSC team (such as a community-based chaplain’s team) or organization affiliated with a recognized non-government disaster response organization such as National Voluntary Organizations Active in Disaster (NVOAD) or Community-based VOAD (COAD).</li> <li>• DSC Provider is previously vetted and trained in DSC, has met the basic requirements of their faith group, and standard of excellence of the deploying agency.</li> </ul>	<ul style="list-style-type: none"> <li>• Vetted volunteer or paid staff DSC team members associated with a government-based agency or non-government disaster response organization (NVOAD), or Community-based VOAD group (COAD).</li> <li>• American Red Cross DSC Team and other VOADs with DSC resources</li> </ul>	Same as above.

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DSC – <b>Supervisor</b>	DSC Specialist – <b>Professional Chaplain</b>  DSC Specialist – <b>Endorsed DSC Provider</b>	<ul style="list-style-type: none"> <li>• Professional Chaplain or Endorsed DSC Provider as specified above.</li> <li>• Previous disaster deployment(s).</li> <li>• FEMA IS 100 and 700 (minimum)</li> <li>• Endorsed by sending organization as a supervisor capable of overseeing the DSC response in the field</li> </ul>	Same as above.	<ul style="list-style-type: none"> <li>• Same as above but at the Supervisory level.</li> <li>• Recommended ratio for DSC Supervisors to DSC staff is 1:7.</li> </ul>
DSC – <b>Unit Leader</b>	DSC Specialist – <b>Professional Chaplain</b>  DSC Specialist – <b>Endorsed DSC Provider</b>	<ul style="list-style-type: none"> <li>• Certified Chaplain or Community Faith Leader as specified above.</li> <li>• Previous disaster deployment as a DSC Supervisor</li> <li>• FEMA IS 100 and 700 (minimum)</li> <li>• DSC Subject Matter Expert (SME)</li> <li>• DSC Tactics and Incident Action Planning expertise</li> <li>• Endorsed by sending organization as a supervisor capable of managing the DSC Unit at the EOC/DOC level</li> </ul>	Same as above.	This is an EOC/DOC-level Unit Leader assigned under Operations with the mission to oversee the DSC Health response for people in the impacted community.

## California Resource Typing for Mental/Behavioral Health and Spiritual Care By Disaster Mission

Behavioral Health = BH      MH = Mental Health      Disaster Spiritual Care = DSC

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<b>Behavioral Health (BH) Mission Support Team</b>	<p>BH <b>Unit Leader</b> or Employee Health and Well Being <b>Unit Leader</b> – Partnered with an Emergency Manager.</p> <p>This team could also include a third member – a Disaster Spiritual Care (DSC) <b>Unit Leader</b> to assist with DSC operations.</p>	<p>This is a two-person team with a BH Unit Leader and an experienced Emergency Manager partner (with County BH Department or Medical and Health Operations experience) who work together to support a BH response in an impacted jurisdiction.</p> <p>This two-person team can also be requested to assist with “Advance Teams” or needs assessment operations.</p>	<ul style="list-style-type: none"> <li>• County MH/BH Department staff and contract providers</li> <li>• County Department of Health including Emergency Medical Services and Public Health</li> <li>• Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> <li>• US Public Health Service (USPHS)</li> </ul>	<ul style="list-style-type: none"> <li>• This is a leadership-level team that can be ordered to partner with a local jurisdiction to support a major BH response. The team would not “manage” the disaster response for the jurisdiction but would act as a support – particularly to help with needs assessments, mission tasking, and resource requests.</li> <li>• This team can also assist with Employee Health and Well Being operations.</li> </ul> <p>Note: HHS/ASPR is currently developing Job Action Sheets for a similar team.</p>
<b>Backfill of MH/BH Department Staff</b>	<p>BH Specialist – <b>Licensed</b></p> <p>BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner Mental Health</b></p> <p>(Other Resource types as requested.)</p>	<p>1 staff per position needed to back fill County BH Department staff for a multi-day disaster assignment.</p>	<ul style="list-style-type: none"> <li>• County MH/BH Department staff and contract providers</li> <li>• County Department of Health including Emergency Medical Services and Public Health</li> <li>• California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> <li>• US Public Health Service (USPHS)</li> </ul>	<ul style="list-style-type: none"> <li>• Specify licensed “eligibility category” needed to backfill staff on the resource request. (See California Resource Typing for Mental/Behavioral Health and Spiritual Care – Specific Resource Types)</li> <li>• Specify Resource Types for MH/BH and DSC</li> <li>• Also specify the BH specialty needed (children (pre-K; K-6), adults, teens, etc.) in the resource request.</li> </ul>

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<b>Community Outreach and Community Meetings</b>	BH Specialist – <b>Licensed</b> BH Specialist – <b>Registered Associate (Intern)</b> BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner</b> (Also consider: <b>DSC Endorsed Spiritual Provider(s)</b> and <b>Certified Drug and Alcohol Counselor(s)</b> )	1 “mutual aid” staff paired with 1 or 2 local BH staff to provide support to community disaster recovery meetings and mobile outreach teams  For a large Community Outreach mission, consider ordering BH – <b>Supervisor</b> , 1 per every outreach region/community or 1 per every 7 team members.	<ul style="list-style-type: none"> <li>• County MH/BH Department staff and contract providers</li> <li>• County Departments of Health including Emergency Medical Services and Public Health</li> <li>• American Red Cross Disaster Mental Health and other VOADs with qualified BH/MH and DSC staff.</li> <li>• California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> </ul>	<ul style="list-style-type: none"> <li>• For resource requests (that the local BH Department does not have the staff to fill) for BH and DSC staff resources from out-of-county, consider a minimum 7 day disaster assignment (5 days working, 2 days travel).</li> <li>• The requesting jurisdiction should specify the qualifications of the BH and DSC staff they are requesting.</li> <li>• The sending jurisdiction should match the request to qualifications of staff offered for deployment.</li> <li>• Statewide training/ credentialing standards for disaster BH and DSC have not yet been established. Therefore, staff offered for deployment should be vetted and trained in disaster BH or DSC response per the requirements of the sending organization.</li> </ul> <p>NOTE: The above recommendations also apply to all other mission types in this document.</p>

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<p><b>Family Assistance Center (FAC)</b> (Red Cross or Government)</p> <p>Note: A FAC can also be called a “Friends and Family Reception Center” (FFRC).</p>	<p>BH Specialist – <b>Licensed</b></p> <p>BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner</b></p> <p>BH <b>Supervisor</b></p> <p>DSC Specialist – <b>Professional Chaplain</b></p> <p>DSC <b>Supervisor</b></p>	<p><b>Behavioral Health:</b></p> <p>&lt;50 Victims and 400 family and friends = 1 BH Supervisor and 5 BH Specialists and 1 BH Specialist – Psychiatric Nurse and Nurse Practitioner</p> <p>(Total per shift/per day).</p> <p>51-300 Victims and 401- 2400 family and friends = 3 BH Supervisors and 20 BH Specialists and 2 BH Specialist – Psychiatric Nurse and NP per day total.</p> <p><b>Disaster Spiritual Care:</b></p> <p>301-1000 Victims and 2401-8000 family and friends = 10 DSC Supervisors and 65 DSC Specialists – Professional Chaplains per day total.</p> <p>The staffing ratio varies based on the needs of people utilizing the FAC.</p>	<p><b>Behavioral Health:</b></p> <ul style="list-style-type: none"> <li>County MH/BH Department staff and contract providers</li> <li>County Department of Health including Emergency Medical Services and Public Health</li> <li>American Red Cross Disaster Mental Health and other VOADs with qualified BH/MH and DSC staff.</li> <li>California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> <li>US Public Health Services (USPHS)</li> </ul> <p><b>Disaster Spiritual Care:</b></p> <ul style="list-style-type: none"> <li>County MH/BH Department staff and contract providers</li> <li>Police, Fire, Law, Hospital, Military Chaplains and vetted Chaplain teams</li> <li>American Red Cross Disaster Mental Health and other VOADs with qualified DSC staff resources</li> <li>California Disaster Healthcare Volunteers (DHV) - including Medical Reserve Corps (MRC)</li> </ul> <p>Note: The source of the suggested staffing ratios for a FAC is from LA</p>	<ul style="list-style-type: none"> <li>Due to the level of trauma expertise needed for a FAC, BH Specialists – Registered Interns and untrained BH or DSC staff should NOT be included in the resource requests for FAC/FFRC operations.</li> <li>Pair local BH and DSC staff with requested “mutual aid” staff.</li> <li>It is advisable to specify “previous disaster experience” or FAC/FFRC training preferred” on the resource request.</li> <li>Consider language and cultural groups needed for the FAC/FFRC and specify language type needed in the resource request.</li> <li>If the population in the FAC is from a specific population such as LGBTQ-2S, specify cultural competency requirements needed in the resource request.</li> <li>For American Red Cross FAC/FFRC ops, resource request for BH or DSC resources should be coordinated with Red Cross Disaster Mental Health leadership through the CEOC.</li> <li>Plan to staff BH and DSC at a reduced level at night for FACs located in hotels where family is staying to assist with crisis BH needs.</li> </ul>

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<p><i>(Continued)</i>  <b>Family Assistance Center (FAC)</b>            (Red Cross or Government)</p>			County Operational Area Family Assistance Center Plan, page 25, table 4 “FAC Site Determination Factors and page 80 “Appendix V; Staffing Guidelines”, (January 31, 2014, v2).	
<b>Field Disaster Psychiatric Hospital and/or BH Response in a Disaster Medical Shelter</b>	BH Specialist – <b>Licensed Psychiatrist</b> BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner MH</b> BH Specialist – <b>Licensed Clinical Social Worker</b> BH <b>Unit Leader</b> BH <b>Supervisor</b> (Also consider DSC needs)	Staffing ratios would follow existing staffing guidelines as much as possible. Example: American Academy of Child and Adolescent Psychiatry (December 1990) suggests: – 1 Psychiatrist – 1 Psychiatric Nurse per 12 pts per shift – 1 Social Worker per 10 pts per shift	<ul style="list-style-type: none"> <li>• Staffing the Field Psychiatric Hospital and/or Medical Shelter Operations with existing local staff from the damaged/destroyed facilities should be considered first.</li> <li>• Hospital/Clinic and other County health agency partners per Operational Area agreements can also be considered.</li> <li>• Federal Disaster Medical Assistance Teams (DMAT)</li> <li>• US Public Health Service (USPHS)</li> <li>• County MH/BH Department staff and contract providers</li> <li>• County Department of Health including Emergency Medical Services and Public Health</li> </ul>	<ul style="list-style-type: none"> <li>• Disaster Field Psychiatric Hospital(s) and/or Medical Shelter Operations may be needed for a catastrophic disaster when local psychiatric facilities are damaged or destroyed.</li> <li>• Resource requests should specify inpatient hospital or psychiatric facility-specific current employment and/or specific specialty, including inpatient child, adolescent or adult expertise.</li> <li>• It is advisable to specify “previous disaster experience and training preferred” on the resource request.</li> <li>• Consider language and cultural groups needed for the hospitals and specify language type needed in the resource request.</li> </ul>

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<b>Employee/ Disaster Responder Mental Health Support</b>	Employee Health and Well Being Unit Leader BH Supervisor BH Specialist – Licensed (Also consider DSC Professional Chaplains or Endorsed Spiritual Providers and Certified Drug and Alcohol Counselors)	1 Employee Health and Well Being Unit Leader to oversee Employee Disaster BH support. For large operations, the Employee Health and Well Being Unit Leader function can be broken up into a Family Support Branch and Employee Support Branch.  Staffing ratio depends on the strategy used: – Staff Helpline: 1 BH Supervisor and 2–7 BH Specialists per shift depending on call volume.  – Staff stress education and drop-in centers: minimum 1 BH Specialist-Licensed and 1 DSC Chaplain or Endorsed Spiritual Provider  – Family Support/ Condolence teams: minimum 1 BH Supervisor condolence operations, 1 BH Specialist-Licensed, 1 DSC Chaplain or Endorsed Provider per outreach team.  – Employee funerals: minimum 2 BH Specialists – Licensed and 2 DSC Professional Chaplains or Endorsed DSC Providers	<ul style="list-style-type: none"> <li>• Employee Assistance Program (EAP)</li> <li>• County MH/BH Department staff and contract providers</li> <li>• Police, Fire, Law, Hospital, Military Chaplains and vetted Chaplain teams</li> </ul>	<ul style="list-style-type: none"> <li>• This mission is likely to be handled locally, however, in a large-scale disaster, particularly with large numbers of employee injuries and deaths, local BH Departments may not have the resources to provide disaster MH support to staff and family members.</li> <li>• Counties typically contact Employee Assistance Program (EAP) services. However, the EAP provider may not have any “surge capacity” or disaster MH/BH expertise to accommodate employee disaster BH response services following a disaster.</li> </ul>

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<b>Hospital Surge</b>	BH Specialist – <b>Licensed Clinical Social Worker</b> BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner MH</b> BH <b>Supervisor</b> Also consider DSC <b>Professional Chaplains</b>	<p><b>Behavioral Health:</b>            1 BH Supervisor, and 2–7 BH Specialists – Licensed Clinical Social Workers total (local plus mutual aid) per shift based on the numbers of family members of those injured or killed, surge of concerned community members, and/or number of impacted hospital staff (for each impacted hospital)</p> <p><b>Disaster Spiritual Care:</b>            Consider a minimum of one DSC Supervisor and 2–7 Professional (Hospital) Chaplains total per shift to pair with BH Specialists.</p>	<ul style="list-style-type: none"> <li>• Hospital Social Work staff from County hospitals or other County healthcare partners</li> <li>• County MH/BH Department staff and contract providers</li> <li>• County Department of Health including Emergency Medical Services and Public Health</li> <li>• California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> </ul> <p>Note: For guidance on Hospital-based Family Assistance Centers, see: Los Angeles County Family Information Center Planning Guide for Healthcare Entities – June 28, 2013 (LA County Emergency Medical Services Agency website, Disaster Programs, Resource Documents <a href="http://dhs.lacounty.gov/wps/portal/dhs/ems/">http://dhs.lacounty.gov/wps/portal/dhs/ems/</a>).</p>	<ul style="list-style-type: none"> <li>• A surge of psychological casualties can occur for CBRNE or mass casualty incidents. The surge may include family members of the missing, injured, deceased in addition to concerned community members who fear they may have been injured by the event. The surge in BH and DSC needs may include:               <ul style="list-style-type: none"> <li>○ Local BH agencies may get requests from hospital partners for BH and DSC staff to assist with a surge of people with post-disaster BH needs, including staff for hospital-based FACs and for hospitalized patients injured in the disaster who need psychological support</li> <li>○ Hospital staff: Hospitals may need assistance with the BH care of staff in a large-scale event. Hospitals may not have Employee Assistance Program staff, Social Work and/or DSC staff to meet this demand.</li> </ul> </li> <li>• Resource Request should specify that BH and DSC resources should have current hospital employment and/or experience.</li> </ul>

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<p><b>Local Assistance Center (LAC)</b></p> <p><b>FEMA Disaster Recovery Center (DRC)</b></p>	<p>BH Specialist – <b>Licensed</b></p> <p>BH Specialist – <b>Registered Associate (Intern)</b></p>	<p>Minimum 2 BH per LAC or DRC per shift.</p> <p>If FEMA is also sending Outreach Teams into the impacted area, add 1 BH per Outreach team per shift.</p>	<ul style="list-style-type: none"> <li>County MH/BH Department staff and contract providers</li> </ul>	<ul style="list-style-type: none"> <li>LACs and FEMA DRCs are generally covered with BH staff from the local County MH/BH agency. However, in a large-scale disaster, a jurisdiction may need to request assistance if multiple LACs and/or DRCs are open.</li> </ul>
<p><b>Public Health Points of Distribution (PODS)</b></p>	<p>BH Specialist – <b>Licensed</b></p> <p>BH Specialist- <b>Registered Associate (Intern)</b></p> <p>BH Specialist – <b>Psychiatric Nurse and Nurse Practitioner</b></p> <p>(Also consider DSC <b>Professional Chaplains</b> or <b>Endorsed Spiritual Providers</b>.)</p>	<p>Staffing depends on the County Public Health POD plan and role specified in the plan for BH and DSC. For example, the LA County POD plan assigns BH to regular POD roles or has 1-2 BH and 1-2 DSC stationed in POD registration or at the “questions” table.</p> <p>Pair local BH and DSC responders with “mutual aid” staff.</p> <p>Also make sure to plan for the BH and DSC needs of POD staff.</p>	<ul style="list-style-type: none"> <li>County MH/BH Department staff and contract providers</li> <li>County Department of Health including Emergency Medical Services and Public Health</li> <li>California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> <li>American Red Cross Disaster Mental Health and DSC teams and other VOADs with qualified BH and DSC staff.</li> </ul>	<ul style="list-style-type: none"> <li>County POD operations are generally staffed with local responders; however, in a large response, County BH Departments may get requests for BH and DSC staff that exceed local resources.</li> <li>Specify POD training or experience, if needed.</li> <li>POD operations for CBRNE events and terrorist attacks will require more BH and DSC staff with “management of fear”, trauma response, and/or public health experience. Specify these requirements if needed in the resource request.</li> </ul>
<p><b>School Disaster Mental Health Crisis Response</b></p>	<p>BH Specialist – <b>School Psychologist and School Counselor</b></p> <p><b>BH Specialist – Psychiatric Nurse and Nurse Practitioner</b> (particularly with school nursing experience) or <b>RN – School Nurses</b>.</p>	<p>Staffing is based on the scope of the disaster.</p> <p>Pair local responders with “mutual aid” staff.</p> <p>Plan for crisis counseling for students, staff, parents; community meetings; hospital visits, funerals, and referrals for local BH trauma treatment.</p>	<ul style="list-style-type: none"> <li>Schools/school-based crisis response teams</li> <li>County MH/BH Department staff and contract providers</li> <li>American Red Cross Disaster Mental Health and DSC teams and other VOADs with qualified BH and DSC staff</li> </ul>	<ul style="list-style-type: none"> <li>BH response to schools is usually staffed by school-based MH/BH staff. However, in a large-scale disaster, shooting, terrorist attack, etc., schools may request BH staff to assist.</li> <li>Local BH departments may need to request mutual aid if they do not have enough staff to cover the needs.</li> </ul>

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<p><i>(continued)</i>  <b>Disaster Mental Health Crisis Response</b></p>	<p><b>BH Supervisor</b>            (Also consider DSC <b>Professional Chaplains</b> or <b>Endorsed Spiritual Providers.</b>)</p>	<p>Consider adding DSCs staff to the resource request, if appropriate. Pair DSC with BH staff.</p> <p>Add 1 BH Supervisor per shift for every 7 responders</p> <p>A “School MH Branch” position can be added under BH Unit Leader to manage the school-based BH Mission.</p>		<ul style="list-style-type: none"> <li>Specify child/teen trauma specialty and/or school-based BH experience on the resource request.</li> <li>Due to the traumatic nature of school-based disasters as well as the high visibility of these events, BH and DSC staff with previous disaster and/or school crisis response experience are preferred.</li> </ul>
<p><b>Shelters (Disaster Shelters)</b> – Government, Red Cross, VOAD partner, or Staff Housing Shelters</p>	<p><b>BH Specialist – Licensed</b>  <b>BH Specialist – Registered Associate (Intern)</b>  <b>BH Supervisor</b>            (Also consider DSC <b>Professional Chaplains</b> or <b>Endorsed Spiritual Providers.</b>)  <b>Consider Certified Drug and Alcohol Counselor (s)</b> as appropriate.</p>	<p>The ratio for BH staffing in shelters is 2 BH staff for every 50-100 shelter residents per shift. This ratio can be more/less depending on the needs of the shelter.</p> <p>1 BH Supervisor for every 7 BH Specialists – Licensed (BH Supervisor can be on site or supervise activities at several smaller shelters)</p> <p>BH Supervisor or BH Specialist – Licensed is REQUIRED if Registered Associates are deployed to shelters.</p> <p>Pair DSC with BH, if DSC staff</p>	<ul style="list-style-type: none"> <li>County MH/BH Department staff and contract providers</li> <li>County Department of Health including Emergency Medical Services and Public Health</li> <li>California Disaster Healthcare Volunteers (DHV) including Medical Reserve Corps (MRC)</li> <li>US Public Health Services (USPHS)</li> <li>American Red Cross Disaster Mental Health and DSC teams and other VOADs with qualified BH and DSC staff</li> </ul>	<ul style="list-style-type: none"> <li>Large numbers of disaster shelters, particularly “mega shelters” with 500 or more shelter residents can exceed the staffing capabilities of a local BH agency.</li> <li>For American Red Cross shelters, resource requests for BH or DSC staff should be coordinated with Red Cross leadership through the CEOC.</li> <li>BH department mission in shelters includes linking disaster clients to regular local BH resources for longer term crisis counseling, trauma treatment, and other follow-up services.</li> <li>Add specific information about language needs and other expertise</li> </ul>

Mission Type	Resource Type	Suggested Staffing Ratio	Source	Notes
<p><i>(Continued)</i>  <b>Shelters (Disaster Shelters) -</b>  Government, Red Cross, VOAD partner, or Staff Housing Shelters</p>		<p>are deployed.</p> <p>Pair local BH staff with “mutual aid” staff.</p> <p>Add Certified Drug and Alcohol Counselor (s) as needed. (See Disaster Substance Abuse above for suggested staffing.)</p> <p>A “Shelter BH Response Branch” position may be added under BH Unit Leader to manage the BH response for large “mega shelters” and/or multiple large shelters</p> <p>A “Shelter DSC Response Branch” position may be added under the DSC - Unit Leader to manage the DSC response for large “mega shelters” and/or multiple large shelters.</p>		<p>such as chronic mental illness, homeless services, or LGBTQ-2S in the resource request so that staff request meets the need of the shelter.</p> <ul style="list-style-type: none"> <li>• Staff Housing Shelters should have separate BH and DSC staff specifically assigned to the Staff Housing Shelter to address the BH and DSC needs of disaster staff, particularly in the evenings when staff are returning to the Staff Housing Shelter at the end of their disaster response shift.</li> </ul>